STATE OF DELAWARE SINGLE POINT OF CONTACT – SPOC INTERGOVERNMENTAL REVIEW OF FEDERAL PROGRAMS Office of Management and Budget Haslet Building, 3rd Floor, Dover, Delaware 19901 (302) 739-4206

STATE APPLICATION IDENTIFIER:	7100-4200				<u> </u>				
59-05-21-07	SPOC use	SPOC use ONLY		R	evlewer	CC's			
01000101			<u> </u>						
2. Applicant Project Title: The Delaware Blotechnology Institute Expans	slon								
3. Applicant Department: University of Delaware	4. Applicant D	4. Applicant Division/APU:							
5. Applicant Address: Hullihen Hall			· ·						
6. Contact Person: Dr. Dan Rich, Provost	7. Contact Person's	Phone I	Number: (36	2) 831-213	6				
8. Signature of Secretary or Agency Head (for state agencies) or Chief Ad	iministrator (for all o	ther appl	lcants)						
Federal Grantor Department: National Institutes of Health	10.	Federal S	Sub-Agency:	National C Resource	enter for Re	search			
11. Federal Contact Person: Willie McCullough, Ph.D.	Federal Contact Person: Willie McCullough, Ph.D.				12. Phone Number: (301) 435-0766				
13. Address: National Center for Research Resources, Democracy One,	, Room 940, 6701 D	emocrac	y Boulevard, B	ethesda, M	D 20892-48	74			
14. Federal Program Title:	15. FEDERAL	OG NO: (CFDA)							
Recovery Act limted Competition – Extramural Research Facilities Improvement Program (C06)	93	'	?//2 \ . (01 DA)	}		•			
The University of Delaware is requesting \$15M in support to build an expa- located behind the DBI building, be connected by corridors to the main buil \$17M, with the remainder of the funds to be provided by other, non-NIH fu	lding and will house and will house a	biomedica	d research labor	ratories. Th	e total budge	addition will be t estimate is			
17. Will funds be utilized for any technology initiatives? ☐ Yes ☐ No	If so, Business C	ase Nun	nber and brief p	-	mary:				
18. Measurable Objectives: a. What were last year's objectives? ////		·							
b. Were these objectives met? (If not, please explain why)									
c. What are this year's objectives?	-								

9. Grant Period:	been t	funded:	21. If the project was funde awarded?						
from: 09/01/2009 Fo: 08/31/2013	Comp	varded yet Limited etitlon under ARRA ery Act	N/A : '	4					
O O o of funding for this applicati	Dollars								
22. Source of funding for this application:				\$15,000,000					
a. Federal grant b. Other federal funds									
(Specify source of funding)	······································								
c. Required state contribution (Specify source of funding)	······								
d. Discretionary state contribution (Specify source of funding)			·		·				
e. Required local contribution (Specify source of funding)	÷.								
f. Other non-federal funds (Specify source of funding)	\$2,000,000								
TOTAL	\$17,000,000								
23. Budget by cost category and sour	ce:	· Federal Funds	State Funds	Other Funds	Total Funds				
Salaries & Fringe Benefits									
Personal or Contractual Services									
Travel									
Supplies & Materials									
Capital Expenditures		\$15,000,000	80	\$2,000,000	\$17,000,000				
Audit Fees	.,		1						
Indirect Costs									
Other					·				
TOTAL			<u> </u>						
24. How many positions are required	for the projec	t? (Exclude casual/seasona	ıl employees)						
Breakdown of position(s)			Authorized in State Budget	New Positions Required	Total				
Paid for out of federal funds					·				
Paid for out of General Funds					:				
Paid for out of state special funds									
Paid for out of bond/local/other fun	ds								
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